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TO

PATENT EXAMINER: JULIET CAROLINE SWITZER

FAX NO.

571.273.8300

FROM

BEN WANG,

PATENT ATTORNEY

PHONE

510.749.4378

FAX

510.749.4268

Re: US Serial No.: 10/719,993 filed: 11/24/2003

Entitled: "GENETIC POLYMORPHISMS ASSOCIATED WITH ALZHEIMER'S DISEASE,

METHODS OF DETECTION AND USES THEREOF"

Atty. Docket No.: CL001496ORD

Attached: SUPPLEMENTARY STATEMENT REGARDING DUTY TO DISCLOSE INFORMATION MATERIAL TO PATENTABILITY UNDER 37 CRF 1.56 (a) and (b)

Ben Wang Sr. Patent Attorney Celera 1401 Harbor Bay Parkway Alameda, CA 94502 Phone: 510.749.4378

Fax: 510.749.4266

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PTO/SB/21 (07-06) Approved for use through 09/30/2006, OMB 0851-0031

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			Application Number	10/719,99	10/719,993			
TRANSMITTAL			Filing Date	Novembe	November 24, 2003			
FORM			First Named Inventor	Michele C	Michele Cergill			
			Art Unit	1634	1634			
(to be used for all correspondence ofter initial filing)			Examiner Name '	Juliet Car	Juliet Caroline SWITZER			
Total Number o	f Pages in This Submission	15	Attorney Docket Number	CL00149	CL001496ORD			
		ENC	LOSURES (Chack	ali that appi	lu)			
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			Provisional Application Power of Attorney, Revoca	ition		•	•	
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Firm Name			,	<u> </u>	•			
Signature			***					
	00							
Printed name	Ben Wang		·					
Date April 20, 2007				Reg. No.	eg. No. 41,420			
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Date April 20, 2007

PTO/SB/17 (02-07)
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Fees pursuant to the Consolidated Appropriations Act, 2005 (Application Number 10/719		19,993	,993	
FEE TRANSMITT	Filing Date	Nov	ember 24, 2003		
For FY 2007	First Named Inventor CARG		RGILL, Michele		
	Examiner Name Juliet C		et Caroline SWIT	aroline SWITZER	
Applicant claims small entity status. See 37 CFF	₹ 1.27	Art Unit	163	4	
TOTAL AMOUNT OF PAYMENT (\$) 180	.00	Attorney Docker	No. CL	4960RD	
METHOD OF PAYMENT (check all that apply)					
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under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Information and authorization on PTO-2038.	Credit card inf	formation should r	not be include	d on this form. Prov	ida credit card
FEE CALCULATION					
1. BASIC FILING, SEARCH, AND EXAMINAT	ION FEES				
FILING FEES	SEAF	RCH FEES	EXAMIN	ATION FEES <u>Small Entity</u>	
Small Entity Application Type Fee (\$) Fee (\$)	Fee (\$	Small Entity Eee (\$)	<u>Fee_(\$)</u>	Fee (\$)	Fecs Paid (\$)
Utility 300 150	500	250	200	100	
Design 200 100	100	50	130	65	
Plant 200 100	300	150	160	80	
Reissue 300 150	500	250	600	300	
Provisional 200 100	0	0	0	0	
2. EXCESS CLAIM FEES	·	•			Small Entity
Fee Description				<u>Fee (\$)</u> 50	<u>Fee (5)</u> 25
Each claim over 20 (including Reissues)	1_:			200	100
Each independent claim over 3 (including R	teissues)			360	180
Multiple dependent claims Total Claims <u>Extra Claims</u> <u>Fee</u>	(\$) Fe	e Pajd (\$)		Multiple Dep	endent Claims
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HP = highest number of total claims paid for, if greater than 20. Indep_Claims					
- 3 or HP = x HP = highest number of independent claims paid for, if gre	hater then 3				
A ADDITION OF EEE					
If the specification and drawings exceed 100	sheets of pa	aper (excluding	electronic	ally filed sequen	ce or computer
listings under 37 CFR 1.52(e)), the applic	ation size f	ee due is \$250	(\$125 for \$	mail entity) for c	ис івпопидря држ
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) - 100 = /50 = (round up to a whole number) x					
4. OTHER FEE(S)					Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)					
Other (e.g., late filing surcharge): Submission	on of Informat	tion Disclosure S	tatement		180.00
SUBMITTED BY					
Signature		Registration No).	Telephon	e 510.749.4378

Name (Print/Type) Ben Wang This collection of information is required by 37 CFR 1.136. The information is required to obtain or rotain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Substitute for form 1449A/PTO				Complete if Known			
				Application Number	10/719,993		
INFORMATION DISCLOSURE				Filing Date	November 24, 2003		
STATEMENT BY APPLICANT (Use as many sheets as necessary)				First Named Inventor	CARGILL, Michele		
			LICANI	Group Art Unit	1634		
			isery)	Examiner Name	GOLDBERG, Jeanine Anne		
Sheet	2	of	2	Attorney Docket No.	CL001496ORD		

NON PATENT LITERATURE DOCUMENTS					
Examiner Initials"	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, scrial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	12		
		GRUPE, A., et al., "A Scan of Chromosome 10 Identifics a Novel Locus Showing Strong Association with Late-Onset Alzheimer Disease," THE AMERICAN JOURNAL OF HUMAN GENETICS, Vol. 787, January 2006, pages 000-000 (Ilpgs)			
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	Date
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